U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only	
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1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

4				. i				
3. Nam	e and address of person fili	ng.		4. Name	, file number, and	address of labor orga	anization.	
Name	Raymond	J Lancaster, 3	Jr. Name United Association Local 393					
				Labor	Organization File	Number 028-02	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
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Street	5104 Elrose Ave.			Street	6150 Cottle	e Rd.		
City	San Jose			City	San Jose			
State	California	ZIP Code + 4	95124	State	California		ZIP Code + 4	95123
5. Positi	on in labor organization.	Business Manager	-Financial Se	ecretar				
		Jubiliess Hallager		SCI G CAI				
Ente	er appropriate data below If,						f the following in	terests
T			specified in the exclu			*		
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6. Name	and address of Employer (including trade name, if a	any).	7.a. Nati	ıre of Interest, Tra	nsaction, or Income.	in the second	
Name	W L Hickey & Sons			100th	Anniversar	y Celebration	•	nera/eniclosizente/de
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subm	gnature and verification. itted in this report (including signed's knowledge and be	the information containe	d in any accompany	ing docum/	ents), has been ex	camined by the signa	that all of the inf tory and is, to the	ormation e best of the
Sign	ed Cal	QX	A	On	8/5/2005	(408) 448-	-2672	
gii	The state of the s		0	-	Date	<u> </u>	elephone Numbe	er
Form LM	-30 (2003)					***************************************		Page 1 of 6

Name of Person Filing Raymond Lancaster, Jr.	File Number U-
B. Held an interest in or derived income or economic benefit with monetary vas ubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Adams Broadwell Joseph & Cardozo Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 601 Gateway Blvd., Suite 1000 City South San Francisco State California ZIP Code + 4 94080-7037	9. Business deals with: A Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Legal Services
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing. \$14,000
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Holiday Gift
	12.b. Amount. \$54
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. Nature of payment.
P.O. Box, Bldg., Room No., if any	
Street City ZIP Code + 4	
40 L L Ha Duning and Duning	14.b. Amount of payment.
13.b. Is the Business an Employer or Consultant ?	

File Number U-

Name of Person Filing Raymond Lancaster, Jr.	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose	
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name MCA of Northern California	Labor Management Dinner/Hotel	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any P O Box 159	7.b. Amount.	
Street		
City Benecia	\$530	
State California ZIP Code + 4 94510		
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name The interest of the in		
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P.O. Box, Bldg., Room No., if any		
Street	7.b. Amount.	
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A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Contract Con		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	i i	
Street	7.b. Amount.	
City		
State State	·	

Form LM-30 (2003)

Add New Part A

Page 3 of 6

Name of Person Filing Raymond Lancaster, Jr.	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Wachovia Securities Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	D. Trust	
Street 303 Almaden Rd.	c. Employer	
City San Jose		
State California ZIP Code + 4 95110		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name UA Local 393 Pension, Health&Welfare Trusts	Investment Consultant	1000
Trade Name, if any:		donormic or resident and a second a second and a second a
P.O. Box, Bldg., Room No., if any P O Box 5057		
Street 1120 South Bascom Ave.	and the second s	***************************************
City San Jose		
State California ZIP Code + 4 95150-5057	11.b. Approximate dollar value of such dealing.	\$160,018
	12.a. Nature of interest held or income received.	rakilitiskalari karilitiskalari karilitiskalari karilitiskalari karilitiskalari karilitiskalari karilitiskalar
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		WOODSTAFFACTALIANA
	12.b. Amount.	\$70

Name of Person Filing Raymond Lancaster, Jr.	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (include	ling trade name	, if any).	9. Business deals with:	
Name UA Local 393 Pension Tr	rust		a. Labor Organization	
Trade Name, if any:	ki mingan mengapung kemina pana pana pana pana pana pana pana p		Bassacand	
`P.O. Box, Bldg., Room No., if any PO I	Box 5057		b. Trust	
Street 1120 South Bascom Ave.			c. Employer	
City San Jose				
State California	ZIP Code + 4	95159-5057		
10. If 9.b. or 9.c. is checked give trust or emp	ployer's name.		11.a. Nature of such dealing.	and an artist and the control of the sendence territorial and analysis and above on a send and a send a send a sending.
Name UA Local 393 Pension Tr	rust		UA Local 393 Pension Trust	·
Trade Name, if any:				*duconomination
P.O. Box, Bldg., Room No., if any PO	Para FOF7			venavysco-oporeja.
	BOX 5057		- Committee of the Comm	And Committee of C
Street 1120 South Bascom Ave.			- Delicion vision	
City Sari Jose				density services and the services are the services and th
State California	ZIP Code + 4	95150-5057	11.b. Approximate dollar value of such dealing.	\$19,465,104
			12.a. Nature of interest held or income received.	
			Expense reimbursement for Internat Annual Educational Meeting	ional Foundation
				demonstration of the second of
			The second secon	TO APP CONTRACTOR
			-	LA SECULIAR DE LA CALLACTICA DE LA CALLA
			12.b. Amount.	\$771

Name of Person Filing	Raymond	Lancaster.	Jr.

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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8. Name and address of Business (includ	ling trade name, if	f any).	9. Business deals with:	
Name UA Local 393 Health & V	Welfare Trust		a. Labor Organization	
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any PO	Box 5057		b. Trust	
Street 1120 South Bascom Ave.	energian de Grand (Carlot de Construction en de construction de la reconstruction de construction de construct	en var det de en regen en de en	c. Employer	
City San Jose	rections the medical production of the state			
State California	ZIP Code + 4 95	5150-5057		
10. If 9.b. or 9.c. is checked give trust or emp	ployer's name.	9984-644-945-95-95-96-96-96-96-96-96-96-96-96-96-96-96-96-	11.a. Nature of such dealing.	
Name UA Local 393 Health & W	Welfare Trust		UA Local 393 Health & Welfare Trus	t
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P.O. Box, Bldg., Room No., if any PO	Pov 5057			шишин
Street 1120 South Bascom Ave.				olganization
1120 South Bascolli Ave.				Statut-Schoolsen
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			12.a. Nature of interest held or income received.	
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			12.b. Amount.	\$771

Raymond J Lancaster, Jr. Period ending December 31, 2004 Page one of one.

Attachment to Form LM-30

Please note: In some cases, I have provided reasonable estimates in good faith. I will file an amended Form LM-30 for 2004 if more complete information becomes available.

Thank you,

Raymond J Lancaster, Jr.